

GW/UST-2

Site Investigation Report For Permanent Closure or Change-in-Service of U.S.T.

FOR
TANKS
IN
NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL
OFFICE ADDRESS].

State Use Only

I.D. Number

Date Received

INSTRUCTIONS

Complete and return within (30) days following completion of site investigation.

I. Ownership of Tank(s)

Owner Name: LADD FURNITURE
 Corporation, Individual, Public Agency, or Other Entity
 Street Address: 1 PLAZA CENTER
 County: GUILFORD
 City: HIGH POINT State: NC Zip Code: 27261
 Telephone Number: (910) 889-0333
 (Area Code)

II. Location of Tank(s)

Facility Name: American Drew Plant # 4-B
 (or Company)
 Facility ID # (if available): 0-06484
 Street Address: HOT D STREET Highway 268 East
 (or State Road)
 County: Wilkes City: Wilkesboro Zip Code: 28659
 Telephone Number: (910) 838-2121 651-9400
 (Area Code)

III. Contact Person

Name: JACK Greer Job Title: _____ Tel. No.: (910) 889-0333
 Closure Contractor: SPATCO ENV. INC. Address: 5100 N. I-85, Charlotte, NC 28206 Tel. No.: 704-596-8624
 Primary Consultant: SPATCO ENV. L.L.P. Address: 4800 N. Graham St. Charlotte, NC 28206 Tel. No.: 704-596-8624
 Lab: Hydrologic, INC. Address: 1491 TWILIGHT TRAIL, Frankfort Ky Tel. No.: 800-728-2251

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water in Excavation		Free Product		Notable Odor or Visible Soil Contamination	
				Yes	No	Yes	No	Yes	No
<u>1</u>	<u>30,000</u>		<u>#6 Fuel Oil</u>		<u>X</u>		<u>X</u>		<u>X</u>
<u>1</u>	<u>30,000</u>		<u>#6 Fuel Oil</u>		<u>X</u>		<u>X</u>		<u>X</u>
<u>1</u>	<u>20,000</u>	<u>10'6" x 31'</u>	<u>#6 Fuel Oil</u>		<u>X</u>		<u>X</u>		<u>X</u>

See reverse side of pink copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

NOTE: The site assessment portion of the tank closure must be conducted under the supervision of a Professional Engineer or Licensed Geologist.

VII. Check List (Check the activities completed)

PERMANENT CLOSURE (For Removing or Abandoning-in-place)

- ☒ Contact local fire marshal.
☒ Notify DEM Regional Office before abandonment.
☒ Drain & flush piping into tank.
☒ Remove all product and residuals from tank.
☒ Excavate down to tank.
☒ Clean and inspect tank.
☒ Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
☒ Cap or plug all lines except the vent and fill lines.
☒ Purge tank of all product & flammable vapors.
☒ Cut one or more large holes in the tanks.
☒ Backfill the area.
 Date Tank(s) Permanently closed: 7/10/97
 Date of Change-in-Service: _____

ABANDONMENT IN PLACE

- ☐ Fill tank until material overflows tank opening.
☐ Plug or cap all openings.
☐ Disconnect and cap or remove vent line.
☐ Solid inert material used - specify: _____

REMOVAL

- ☒ Create vent hole.
☒ Label tank.
☒ Dispose of tank in approved manner.
 Final tank destination: Southern tank
Charlotte, NC

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative

Signature

Date Signed

DAVID M. THOMPSON, Staff Scientist, SPATCO ENV. INC.

GW/UST-2 (Rev. 9/18/95)

White Copy - Regional Office

Yellow Copy - Central Office

Pink Copy - Owner